



**ON-SITE WASTEWATER PROGRAM
ALTERATION PERMIT
REPLACEMENT OF ONE
COMPONENT OF AN OSWTF**

*An Alteration permit allows for replacement of one component, either the disposal field **OR** the septic tank, of a previously approved On-Site Wastewater Treatment Facility (OSWTF, formerly known as a septic system).*

The cost of an Alteration permit is \$75.00, if installed and certified by a Registered Contractor. If MCESD is to inspect the installation, the total fee would be \$400.00 for one inspection visit. If additional visits are required, additional fees may also be required.

SUBMITTAL REQUIREMENTS

Submit to MCESD by certified mail or in person, a complete NOID Packet.

A complete Alteration NOID Packet must include, but is not limited to:

- A NOID Application, filled out completely and signed by the owner* of the property.
 - ✓ Check the box on the NOID application for ALTERATION PERMIT
 - ✓ Fill out any existing permit information where directed
 - ✓ The NOID application must be filled out in its entirety
 - ✓ The NOID application must have an original signature by the owner of the property
- 2 copies of a complete site plan of the property, to a scale of 1"=30', 1"=20' or 1"=10'. A complete site plan clearly identifies all existing features and any proposed changes, the existing OSWTF(s) and the proposed changes to the system(s).
- 1 copy of the current floor plan showing all structures with plumbing for wastewater.
- 1 official recorded deed to the property, clearly showing the legal description.
- Any other required supporting documents.
- \$75.00, cash, check or certified fund made payable to MCESD.

* As per the Aquifer Protection Permit Rule A301(B). Under MCESD definitions; Names such as Owner, Applicant, Permittee and Person who has overall responsibility for compliance of the permit are one in the same.

➔ **INCOMPLETE PACKETS WILL NOT BE ACCEPTED** ➔

PLAN REVIEW PROCESS

The plan review process can take up to five (5) days to complete if there are no deficiencies discovered during the plan review process.

- MCESD will process the application and if there are no deficiencies, will then issue a construction permit titled – Construction Authorization.
- If there are deficiencies found, a written explanation will be provided to the Owner and/or Authorized Agent on the application outlining the deficiencies and identifying the necessary corrective action. The permit will be placed on HOLD until all corrections have been addressed. At that point the plan review process will continue. The notification will be faxed and/or mailed to the Owner and/or Authorized Agent.

READ THE PERMIT THOROUGHLY, INCLUDING ALL STIPULATIONS AND SPECIAL REQUIREMENTS BEFORE BEGINNING THE CONSTRUCTION OF THE ALTERATION. IF YOU HAVE ANY QUESTIONS PLEASE CONTACT OUR OFFICE FOR TECHNICAL SUPPORT AT 602-506-6666.

COMPLETION PROCESS

- After installation is completed as directed by the Authorization, follow the stipulations of the permit for the approval process.
- Once the inspection of the alteration construction has been approved and/or the Certificate of Completion documents have been submitted and approved a Final Administrative Review will take place.
 - If there are no deficiencies found, a Discharge Authorization will be issued. The file will then be considered complete and filed for future use.
 - If there are further deficiencies found, a written explanation will be provided outlining these deficiencies. The written explanation will be faxed or mailed to the Owner and/or Authorized Agent.

SETBACK DISTANCE CHART

The design of the On-Site Wastewater Treatment Facility shall comply with the setbacks indicated below.

Features Requiring Setbacks	Setback For An On-Site Wastewater Treatment Facility, Including Reserve Area (In Feet)	Special Provisions
1. Building	10	Includes porches, decks, and steps (covered or uncovered), breezeways, roofed patios, carports, covered walks, and similar structures and appurtenances.
2. Property line shared with any adjoining lot or parcel not served by a common drinking water system* or an existing drinking water well	50	<p>A person may reduce the setback to a minimum of 5 feet from the property line if:</p> <ul style="list-style-type: none"> a. The owners of any affected undeveloped adjacent properties agree, as evidenced by an appropriately recorded document, to limit the location of any new well on their property to at least 100 feet from the proposed treatment works and primary and reserve disposal works; and b. The arrangements and documentation are approved by the Department. <p>* A "common drinking water system" means a system that currently serves or is under legal obligation to serve the property and may include a drinking water utility, a well-sharing agreement, or other viable water supply agreement.</p>
3. All other property lines.	5	None
4. Public or private water supply well.	100	None
5. Perennial or intermittent stream	100	Measured horizontally from the high water line of the peak streamflow from a 10-year, 24-hour rainfall event.
6. Lake, reservoir, or canal	100	Measured horizontally from the high water line from a 10-year, 24-hour rainfall event at the lake or reservoir.
7. Drinking water intake from a surface water source (includes an open water body, downslope spring or a well tapping streamside saturated alluvium)	200	Measured horizontally from the on-site wastewater treatment facility to the structure or mechanism for withdrawing raw water such as a pipe inlet, grate, pump, intake or diversion box, spring box, well, or similar structure.
8. Wash or drainage easement with a drainage area more than 20 acres	50	Measured horizontally from the nearest edge of the defined natural channel bank or drainage easement boundary. A person may reduce the setback to 25 feet if natural or constructed erosion protection is approved by the appropriate floodplain administrator.
9. Water main or branch water line	10	None

10. Domestic service water line	5	<p>Measured horizontally between the water line and the wastewater pipe, except that the following are allowed:</p> <ul style="list-style-type: none"> a. A water line may cross above a wastewater pipe if the crossing angle is between 45 and 90 degrees and the vertical separation distance is 1 foot or more. b. A water line may parallel a wastewater pipe with a horizontal separation distance of 1 foot to 5 feet if the bottom of the water line is 1 foot or more above the top of the wastewater pipe and is in a separate trench or on a bench in the same trench.
<p>11. Downslopes or cut banks greater than 15 percent, culverts, and ditches from:</p> <ul style="list-style-type: none"> a. Treatment works components b. Trench, bed, chamber technology, or gravelless trench with: <ul style="list-style-type: none"> i. No limiting subsurface condition specified in R18-9-A310(D)(2), ii. A limiting subsurface condition. c. Subsurface drip lines. 	<p>10</p> <p>20</p> <p>50</p> <p>3</p>	<p>Measured horizontally from the bottom of the treatment works component to the closest point of daylighting on the surface.</p> <p>Measured horizontally from the bottom of the lowest point of the disposal pipe or drip lines, as applicable, to the closest point of daylighting on the surface.</p> <p>Measured horizontally from the bottom of the lowest point of the disposal pipe or drip lines, as applicable, to the closest point of daylighting on the surface.</p>
12. Driveway	5	Measured horizontally to the nearest edge of an on-site wastewater treatment facility excavation. A person may place a properly reinforced and protected wastewater treatment facility, except for disposal works, at any location relative to a driveway if access openings, risers, and covers carry the design load and are protected from inflow.
13. Swimming pool excavation	5	Except if soil loading or stability concerns indicate the need for a greater separation distance.
14. Easement (except drainage easement)	5	None
15. Earth fissures	100	None

SEWER DETERMINATION

THE OWNER OR PERSON REQUESTING TO INSTALL AN ONSITE SYSTEM MUST DETERMINE THE LOCATION OF THE NEAREST SEWER TAP TO THE PROPERTY. ARIZONA ADMINISTRATIVE CODE R18-9-A309.A.5 SETS REQUIREMENTS FOR HOOK-UP TO SANITARY SEWER.

"A PERSON...SHALL CONNECT TO A SEWAGE COLLECTION SYSTEM IF:

...B. A SEWER SERVICE LINE EXTENSION IS AVAILABLE AT THE PROPERTY BOUNDARY AND BOTH OF THE FOLLOWING APPLY:

- I. THE SERVICE CONNECTION FEE IS NOT MORE THAN \$6000 FOR A DWELLING... AND
- II. THE COST OF CONSTRUCTING THE BUILDING SEWER FROM THE WASTEWATER SOURCE TO THE SERVICE CONNECTION IS NOT MORE THAN \$3000 FOR A DWELLING...."

MARICOPA COUNTY PROVIDES THE PHONE NUMBERS BELOW TO BEGIN YOUR SEARCH. SOME MUNICIPALITIES MAY HAVE MORE STRINGENT REQUIREMENTS AND WILL REQUIRE CONNECTION TO CITY SEWER. A STATEMENT INDICATING THE AVAILABILITY OF THE SEWER IS NEEDED PRIOR TO ANY SUBMITTAL TO THE ENVIRONMENTAL SERVICES DEPARTMENT.

AVONDALE	623-478-3330	www.ci.avondale.az.us
BUCKEYE	623-386-2487	www.buckeyeaz.gov
CAVE CREEK	480-488-1400	www.cavecreek.org
CHANDLER	480-782-3800	www.chandleraz.gov
CAREFREE	480-488-3638	www.carefree.org
EL MIRAGE	623-933-8318	www.cityofelmirage.org
GILBERT	480-503-6000	www.ci.gilbert.az.us
GLENDALE	623-930-2000	www.ci.glendale.az.us
GOODYEAR	623-932-1637	www.ci.goodyear.az.us
MESA	480-644-4273	www.cityofmesa.org
PARADISE VALLEY	480-348-3528	www.ci.paradise-valley.az.us
PEORIA	623-773-7210	www.peoriaaz.com
PHOENIX	602-262-6551	www.ci.phoenix.az.us
QUEEN CREEK	480-987-0496	www.queencreek.org
SCOTTSDALE	480-312-2356	www.ci.scottsdale.az.us
SURPRISE	623-583-0947	www.surpriseaz.com
TEMPE	480-350-8341	www.tempe.gov
TOLLESON	623-936-7141	www.tollesonaz.org

MARICOPA COUNTY ENVIRONMENTAL SERVICES MAKES EVERY ATTEMPT TO PROVIDE ACCURATE INFORMATION. PHONE NUMBERS MAY CHANGE WITHOUT OUR KNOWLEDGE.



Closure and Inspection Requirements

Arizona Administrative Code R-18-9-A309
Maricopa Environmental Health Code Chapter 2 Section 8

Closure requirements: A permittee who permanently discontinues use of, wishes to close an on-site-wastewater treatment facility (septic systems), or is ordered by the Director to close and abandon a facility shall:

- 1) Submit completed General Application, official recorded deed, site plan to scale, any associated permit numbers, if known, and \$175 inspection fee.
- 2) Remove all sewage from the facility and dispose of in a lawful manner.
- 3) Disconnect and remove electrical and mechanical components.
- 4) Cut and plug both ends of the abandoned sewer drain pipe between the building and the on-site wastewater treatment facility not more than five feet outside the building foundation, if practical, or cut and plug as close to each end as possible.
- 5) Fill any disposal cavity (e.g. cess pool, lined pit)
- 6) Closure by either of the following two methods:
 - a) Remove entire tank, call for inspection prior to backfilling cavity OR
 - b) Remove and break tank lid, punch hole in bottom of tank and call for inspection.
Abandonment/closure inspection phone number: 602-506-6666 options 1 – 5 – 3. Have permit number available when you call.
- 7) **After inspection**, approval and receipt of White Tag continue with construction. Fill the (a) cavity or (b) tank with approved material consisting of earth, sand, gravel, concrete or other approved fill material.
- 8) Regrade surface to provide positive drainage.

*If closure/abandonment is required during a repair or alteration, follow the directions in that construction permit to submit Certification of Completion for the septic tank installation.

****** EXTRA CHARGES WILL APPLY FOR REPEAT INSPECTIONS ******

Maricopa County Environmental Services Department
Water & Waste Management Division
(Delegated Authority for ADEQ)
1001 N Central Ave, Suite 150
Phoenix, AZ 85004
Phone: (602) 506-6666
Fax: (602) 506 6925



NOTICE OF INTENT TO DISCHARGE (NOID)

Under a General Aquifer Protection Permit for an
On-Site Wastewater Treatment Facility (OSWTF)

OSWTF Permit # _____

Instructions: Fill out completely (failure to do so will result in a delay of the permitting process) and submit this NOID to obtain authorization to construct and approval to discharge from a new or altered OSWTF, including a **conventional septic tank and / or disposal field system or alternative on-site treatment and disposal technologies** covered by Aquifer Protection Permits. All required information must be submitted along with this application and applicable fees, cash or check only. **Print or type in black or blue INK** (pencil is not acceptable) all information except the signature block on page two. This application will expire one year from the date of submittal if Construction Authorization has **not** been issued.

1. Site Location:

Subject Property Address: _____
Required at time of PVGPC issuance Street Name and Number City (if applicable) Maricopa County, AZ Zip Code

Cross Streets _____ Parcel Number _____ - _____ - _____

Subdivision Name (if applicable): _____ Lot #(s) _____

Legal Description: Section _____ Township _____ Range _____ Acreage _____

2. Property Owner

Name: _____ Phone # _____

Current Mailing Address*: _____
Street Name and Number City State Zip Code Fax # _____

Mobile # _____

*Any changes to this address shall be submitted in writing to MCESD within 15 days of the change. All documents from MCESD will be mailed to this address unless otherwise noted below. Returned mail will not be forwarded.

3. Authorized Agent for Property Owner, (if none, then leave blank):

Business Name: _____

Agent's Name _____ Contractor License #: _____

Business Mailing Address: _____
Street Name and Number City State Zip Code Phone # _____

Fax # _____

Are you authorized to install the OSWTF? (circle one) YES NO Mobile # _____

If NO, fill out the Septic Installer information below:

After 30 Days, unclaimed Authorizations to Construct will be mailed to: (circle one) Property Owner Authorized Agent

4. On-Site Installer - Person authorized to install the OSWT, (if same as the Property Owner or Authorized Agent, leave blank):

Business Name: _____ Contact Person Name: _____ Contractor's License # _____

Business Mailing Address: _____
Street Name and Number City State Zip Code Phone # _____

Fax # _____

Mobile # _____

THIS IS A TWO (2) PAGE DOCUMENT; BOTH PAGES MUST BE COMPLETED BEFORE SUBMITTING TO MCESD.

THIS SPACE FOR OFFICE USE ONLY

LICENSING TIME FRAMES

NOID Log in Date _____ By _____

ACR Completed _____ By _____
Paperwork Review

ACR Incomplete/HOLD _____ By _____

SR Pre Const Completed _____ By _____
Plan Review

SR Pre Const -Incomplete/HOLD _____ By _____

SR Post Const Completed _____ By _____
Inspection

Site Code: _____

MC P/D Tracking # B _____

APPROVALS: General Permit (circle one): 4.02 Other _____

Design Flow: _____ gpd System Type: _____

BILLING PURPOSE	AMT PD	RECEIPT #	DATE PD
PLAN REVIEW / SITE			
PLAN REVIEW / SITE			
OTHER			

5. **Site Details:**

SEWER (circle one) **IS** / **IS NOT** AVAILABLE WITHIN 400' OF THE PROPERTY.

WATER SOURCE: (check one) _____ Water Company: Water Company Name _____
 _____ Holding Tank (hauling water) - Fifty foot (50') setback is required.
 _____ Private Well
 _____ Shared Well* - SWA Recording # _____
 Well Identification # _____

* A copy of all shared well agreements, recorded as an attachment to the deed of the subject properties, may be required as supplemental information **IF** the fifty foot (50') setback to the common property line between the OSWTF and adjacent property can not be met **AND** there is not a well already installed on the adjacent property to the side that can not meet the required setback.

ALL EXISTING WELLS ON AND WITHIN 200' OF THE SUBJECT PROPERTY ARE SHOWN ON THE SITE PLANS, (circle one). **YES** **NO**

Check One: _____ Prior site work has been initiated and is on file with MCESD, W/WM. Existing file number(s) _____
 _____ No prior site work has been filed for this site with MCESD, W/WM. The NOID Packet includes all site/soils reports.

6. **Narrative Description of Project:**

☐ **NEW - General Permit 4.02** (OSWTF which consists solely of a septic tank **AND** conventional disposal field circled below):

(circle one) Trench Seepage Pit Leach Bed Chamber Technology

☐ **ALTERATION - General Permit 4.02** (OSWTF which consists solely of a septic tank **OR** conventional disposal field circled below):

(circle one) Tank Trench Seepage Pit Leach Bed Chamber Technology

☐ **Any Other OSWTF.** Describe proposed treatment and disposal train and indicate all applicable general permit numbers; indicate design flow and expected date of operation; describe sewage source and characteristics: _____

THE OSWTF WAS DESIGNED USING A SEPTIC TANK SIZE AND A DESIGN FLOW TO:

- ☐ **Serve a Single-Family Residence** with typical household sewage.
- ☐ **Serve a Single-Family Residence** with typical household sewage and _____
List all other sources and characteristics of the wastewater
- ☐ **Serve Other Than a Single-Family Residence** with typical household sewage.
- ☐ **Serve Other Than a Single-Family Residence** with other than typical household sewage.
If other than a Single-Family Residence, then fill out the following information:
- Type of Facility** _____ **Number of Employees/Users** _____
- ☐ Other sources and characteristics of the wastewater _____

7. **Acknowledgement:**

I, _____ (Property Owner), am aware that although a septic tank and disposal works system described in R18-9-E302 is appropriate for the site, I desire to install a treatment works or disposal works authorized under R18-9-E303 through R18-9-E322. (R18-9-311(D)(1). I am also aware that a treatment works or disposal works authorized under R18-9-E303 through R18-9-E322 may result in higher capital, operation, and maintenance costs. (R18-9-311(D)(2).

 Signature of Owner

 Date

8. **Existing Environmental Permits:**

List any state or federal environmental permits already associated with this site or that are needed (check all that apply) :
 _____ New installation of an on-site wastewater treatment facility. _____ No other environmental permits exist. _____ Other environmental permits required (list all): _____

9. **Certification: (READ CAREFULLY AND SIGN BELOW, to be completed by the property owner identified in Item Two (2) on the front of this application:**

I _____, certify that this Notice of Intent to Discharge and all attachments were prepared
Print Name
 under my direction or authorization and all information is, to the best of my knowledge, true, accurate and complete. I also certify that the on-site wastewater treatment facility described in this form is or will be designed, constructed, and operated in accordance with terms and conditions of the authorized general aquifer protection permit(s) and applicable requirements of Arizona Revised Statutes Title 49, Chapter 2, and Arizona Administrative Code Title 18, Chapter 9 regarding aquifer protection permits and the Maricopa County Health Code. **I am aware that there are significant penalties for submitting false information including permit revocation as well as the possibility of fine and imprisonment for known violations.**

 Signature

 Date